

UNITED STATES DEPARTMENT OF COMMERCE

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FIRST NAMED APPLICANT **SERIAL NUMBER FILING DATE** ATTORNEY DOCKETT NO. 08/404832 **EXAMINER ART UNIT** PAPER NUMBER DATE MAILED: **EXAMINER INTERVIEW SUMMARY RECORD** All participants (applicant, applicant's representative, PTO personnel): (3) arianne Date of Interview Type:

Telephonic Personal (copy is given to Capplicant applicant's representative). Exhibit shown or demonstration conducted:

Yes
No. If yes, brief description: __ Agreement was reached with respect to some or all of the claims in question. was not reached. all pending claims Identification of prior art discussed: _ Description of the general nature of what was agreed to if an agreement was reached, or any other comments: (A fuller description, if necessary, and a copy of the amendments, if available, which the examiner agreed would render the claims allowable must be attached. Also, where no copy of the amendments which would render the claims allowable is available, a summary thereof must be attached.) 1. It is not necessary for applicant to provide a separate record of the substance of the interview. Unless the paragraph below has been checked to indicate to the contrary, A FORMAL WRITTEN RESPONSE TO THE LAST OFFICE ACTION IS NOT WAIVED AND MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW (e.g., items 1-7 on the reverse side of this form). If a response to the last Office action has already been filed, then applicant is given one month from this interview date to provide a statement of the substance of the interview. ☐ 2. Since the examiner's interview summary above (including any attachments) reflects a complete response to each of the objections, rejections and requirements that may be present in the last Office action, and since the claims are new allowable, this completed form is considered to fulfill the response requirements of the last Office action. Applicant is not relieved from providing a separate record of the substance of the interview unless box 1 above is also checked.

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PTOL-413 (REV. 2 -93)

Examiner's Signature